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APPLICATION NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
10/27/96, 794	08/27/96	008	WINGOOD, F	3-301 07/22/97

First Name
Applicant
TITEL OF
INVENTION
BODY FUNCTION MEASURING APPARATUS

Check if additional changes are enclosed

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEES DUE	DATE DUE
3 ATR-650	128-736,000	B59	UTILITY	NO	\$1320.00	10/22/97

3. Correspondence address change (Complete only if there is a change)

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4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR, alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.

1 Ratner & Prestia
2 _____
3 _____

5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (print or type)

(1) NAME OF ASSIGNEE: Air-Shields, Inc.
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The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified above.

Authorized Signature *Andrew L. Ney* (Date) *Oct 22, 1997*
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